



CITY OF SUGAR LAND
Re-submittals & Revised Plans
Application

APPLICATION NUMBER: _____

VALUATION: _____

PROJECT ADDRESS: _____

TENANT NAME: _____

PROJECT NAME: _____ **SUBDIVISION:** _____

LEGAL DESCRIPTION: _____
Lot/Tract Block Section Addition

***Please identify Plans as: a “Re-submittal”** (plans that address the City of Sugar Land’s comments); **“Revised”** (plans that contain revisions *whether or not permit has been issued*); **or as both** – a “Re-submittal” (addressing City’s comments) that contains additional revisions (unrelated to City’s comments)

☐ **“Re-submittal”**

Date of original submittal(/ /): _____

☐ **Revised Plans**

Description of changes: _____

Contractor Street Address City State Zip Code Phone Fax

Separate permits are required for electrical, plumbing, heating, ventilating, and air conditioning. This permit becomes null or void if work or construction authorized is not commenced within six (6) months, or if construction or work is suspended or abandoned for a period of six (6) months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

****THE FOLLOWING CONTACT INFORMATION MUST BE FILLED OUT****

Signature Of Owner or Authorized Agent Date Printed Name Company

Street Address City State Zip Code

Phone Fax Cell Email

FOR OFFICE USE ONLY

PERMIT FEE: \$_____ PLAN CHECK FEE: \$_____ TOTAL FEE: \$_____

PLAN REVIEWED BY: _____

APPROVED FOR ISSUANCE BY: _____